

TOWN OF UXBRIDGE
ELECTRICAL DEPARTMENT
APPLICATION FOR RE-INSPECTION PERMIT

DATE _____ **PERMIT #** _____

ORIGINAL PERMIT # _____

LOCATION _____

OWNER/BUILDER _____

INSPECTION DATE REQUESTED: _____

FIRM NAME _____ **LICENSE #** _____

LICENSEE _____ **LICENSE #** _____

SIGNATURE _____

ADDRESS _____ **TEL#** _____

_____ **ALT TEL#** _____

PERMIT FEE \$25.00